# OPEGA Information Brief

**Purpose** 

In April 2013, the Government Oversight Committee (GOC) placed a review of workplace culture and environment at the Department of Health and Human Services (DHHS) on OPEGA's work plan. Complaints from current and former DHHS employees had raised questions for legislators about whether the climate is conducive to recruiting, retaining and engaging capable, knowledgeable and motivated employees.

The initial phase of OPEGA's review focused on assessing the extent to which the complaints represented systemic issues within DHHS and/or warranted detailed root cause analysis. In making this assessment, OPEGA:

- analyzed information provided by complainants;
- interviewed DHHS management and other stakeholders:
- analyzed data from DHHS employee surveys and compared results to relevant organizational studies; and
- analyzed data on grievances and terminations across State agencies.

OPEGA also reviewed the actions being taken by DHHS to address organizational issues and compared them to common practices identified in our review of literature on organizational culture.

Based on our results, described in this Information Brief, OPEGA recommended the GOC forgo detailed root cause analysis.

**April 2015** 

SR-DHHSCUL-14

DHHS Workplace Culture and Environment: Survey results show employees generally satisfied; organizational issues present in some offices; DHHS engaged in culture change efforts



#### Summary

The Department of Health and Human Services (DHHS) is Maine's largest Executive Branch department with over 3,000 employees in multiple offices. Complaints reviewed by OPEGA originated primarily from three offices – Maine Center for Disease Control and Prevention (MCDC), Riverview Psychiatric Center (RPC) and the Division of Licensing and Regulatory Services (DLRS), specifically the unit within that Division responsible for child care services. OPEGA's research and analyses suggest the more serious concerns expressed in the individual complaints are not systemic throughout DHHS, but may be present in several offices within the Department, including two of those associated with the complaints.

Statements from complainants, DHHS management, and other stakeholders indicate that personnel at different levels of DHHS perceive certain aspects of the Department's culture and practices differently. The information provided by these sources also suggests there are multiple factors affecting the workplace culture, and perceptions of it, including:

- historical changes in the Department's organizational structure;
- long-standing morale issues;
- past and present management approaches, including an intent on the part of the current administration to place more emphasis on employee performance and accountability; and
- gaps between senior management and front line staff in communications and understanding of the Department's current philosophy and direction.

Surveys administered in 2013 and 2014 represent an effort by the Department to understand employees' perspectives on the work environment. OPEGA analyzed the DHHS survey data, which we judged to be reliable and relevant given the survey design, the manner in which the survey was conducted, and the response rate. Survey results indicate that, overall, DHHS employees are generally satisfied with the climate and work environment, including how they are treated by their managers and coworkers. There are somewhat lower levels of satisfaction with communication. When analyzed by DHHS office, the survey results indicate lower and/or declining satisfaction levels in certain offices, particularly on measures of communication and management quality. These offices include MCDC and RPC, two of the three offices generating complaints we reviewed, as well as Disability Determination Services (DDS) and Financial Management (accounting, auditing and rate setting).

OPEGA also analyzed data for employee grievances and terminations, provided by Maine State Employees Association (MSEA) and Department of Administrative and Financial Services Bureau of Human Resources (BHR) respectively, for all Executive Branch departments. While we did not assess the reliability of these data, we considered them sufficient for identifying trends and comparing departments. Our analyses of grievance and termination rates show that DHHS does not stand out among State agencies on these high-level work environment indicators. However, for a subset of terminations and grievances we considered relevant to complainants' concerns, DHHS is above average among State agencies.

Through interviews and reviews of documents provided by DHHS, OPEGA observed that the Department is taking active steps to assess and improve the organizational culture and work environment. These efforts reflect some of the recommended practices OPEGA identified in our review of literature on organizational culture and climate. For example, collecting and analyzing data from regular employee surveys is one of the primary methods recommended to diagnose and assess organizational culture. Studies of organizational culture that OPEGA reviewed also showed that the root causes of identified issues, and the recommendations to address them, were typically focused in several key areas: communication, supervisory training, personnel policies, employee input and oversight of management.

Actions DHHS has taken to date appear consistent with those recommendations and can be expected to result in positive change if sustained over time. However, DHHS efforts to address its organizational culture and work environment are still relatively new, and levels of engagement in these efforts vary across offices. For example, the extent to which managers of DHHS offices have used the climate survey results to address identified issues and make improvements varies considerably. Consequently, OPEGA offers several suggestions for improvement as DHHS continues its efforts. These include:

- administering the employee climate survey on a regular basis as planned;
- adding questions to the climate survey from the professional literature on measuring employee engagement;
- analyzing survey data separately for sub-units of the larger offices/divisions to identify pockets of concern and efficiently target follow-up efforts;
- establishing specific expectations for survey follow-up by all offices within DHHS and holding senior management responsible for meeting those expectations;
- identifying successful actions taken by individual offices and implementing them in other offices;
- encouraging offices to develop strategic action plans that include steps to increase employee engagement and incorporating implementation of these plans into performance appraisals for managers; and
- continuing and expanding efforts to build employee trust, recognize and reward accomplishments and increase transparency through frequent and open communication.

#### **Understanding Organizational Culture**

OPEGA reviewed existing literature on organizational culture and researched standard methods and indicators used for the diagnosis and analysis of culture. We sought to understand how organizational culture is defined and how culture issues are diagnosed, with a focus on the public sector context. We also reviewed several reports from federal and state government agencies that included employee survey results (see Bibliography).

We found that, while there is no universal agreed-upon definition of organizational culture, there are some common concepts that emerge in the literature. Taken together, the definitions describe organizational culture as the underlying, enduring core values, assumptions, and expectations, often tacit and unwritten that are shared within an

organization and expressed in the behavior of its members. Research indicates a close relationship between a healthy organizational culture and high levels of employee engagement. The concept of employee engagement, which also has many definitions in the literature, refers to the level of employee satisfaction, commitment, connection, and dedication to one's job and the organization<sup>1</sup>.

The literature describes how public sector organizations face some different challenges than private sector organizations in fostering employee engagement. For example, public sector organizations have limited financial tools and incentives to reward employees, must respond to multiple external stakeholders, serve under political leadership that may change frequently, and often have goals and impacts that are difficult to quantify and measure<sup>2</sup>.

Recommended methods for diagnosing organizational culture include collecting primary data through employee surveys and interviews, as well as analyzing administrative data maintained by the organization, such as personnel data. Employee climate surveys, in particular, are recognized as a valuable way to assess employee engagement and the work environment and identify areas for improvement<sup>3</sup>. Such surveys are particularly effective when administered annually or biennially so the organization can track trends and progress against a baseline. For this review, OPEGA was able to obtain and analyze two years of existing DHHS employee survey data, as well as administrative data on employee terminations and grievances.

#### Perspectives on DHHS Culture

OPEGA gathered information on DHHS culture from multiple perspectives, including the former and current employees with complaints, DHHS and BHR management, and MSEA representatives who work with DHHS employees.

#### Complainants

OPEGA reviewed and analyzed unsolicited written complaints and related documents from 18 former and current DHHS employees, and conducted follow-up interviews with complainants. Most complaints were from employees in three DHHS offices: Maine Center for Disease Control (MCDC), Division of Licensing and Regulatory Services (DLRS) Child Care Licensing Unit, and Riverview Psychiatric Center (RPC). We identified several themes in the complaints.

- Unprofessional behavior of supervisors and among peers affected quality of work, employee stress and work environment.
- Employees' professional concerns about the actions and behavior of supervisors and other employees were not taken seriously by management, and management's response to employee concerns was inadequate.
- Raising concerns led to management actions perceived as hostile and retaliatory by employees, and anticipated retaliation led to fear of voicing concerns.
- Employees lacked confidence in the channels available to address concerns; human resources personnel were not trusted, and union representation was perceived as ineffective.
- Communications by management regarding organizational philosophy and direction, whether they were changing and why, were ineffective.

<sup>&</sup>lt;sup>1</sup> Lavigna, R. J. (2013). Engaging Government Employees: Motivate and Inspire Your People to Achieve Superior Performance, ch. 2.

<sup>&</sup>lt;sup>2</sup> Ibid., 54.

<sup>&</sup>lt;sup>3</sup> *Ibid.*, 3, 183.

Complainants indicated that management's response to concerns regarding the work environment and employee behavior, in at least some DHHS offices, has been problematic for employees. They described a top-down management structure and hostile environment that discourages employees from raising legitimate concerns. They reported employees taking early retirement, transferring to other DHHS offices or State agencies, resigning, or being terminated as a result.

#### DAFS Bureau of Human Resources and DHHS Management

Managers at BHR<sup>4</sup> reported to OPEGA that the current Administration has increased the focus and expectations around employee performance across the Executive Branch. This includes a focus on supervisors meeting their responsibilities for measuring performance and holding their employees accountable. They noted that some employees feel this change in accountability more than others, and that supervisors who are more proactive in this area may be the subject of complaints or grievances. They described the role of BHR as supporting the implementation of the Administration's priorities and directives by providing office managers and supervisors with necessary information, training, and support.

Senior management of both DHHS and BHR acknowledged morale issues among employees in DHHS. Some traced current morale issues back to the 2004 merger of Behavioral and Developmental Services and the Department of Human Services to create DHHS. According to those we interviewed, the two departments that merged had distinctly different cultures, missions and priorities, and the merger continues to affect aspects of the work environment. Others we spoke with mentioned the more recent emphasis on employee accountability, as described above, as a contributing factor in the morale issues.

The DHHS Commissioner acknowledged the need to change the Department's managerial approach in order to shift away from a historic top-down culture, and expressed a commitment to engaging all employees in meaningful ways and valuing their input and opinions. The Commissioner's concerns about morale, interest in employee opinions and experiences, and desire to open lines of communication provided the impetus for the development and implementation of the DHHS Employee Climate Survey, which was administered to all staff in 2013 and 2014.

OPEGA observed some disconnects between what management thinks it is communicating to employees about expectations and what lower level employees are hearing and perceiving as reported by complainants. For example, management efforts to improve accountability and adherence to policies such as attendance, maintaining office hours, and communication with supervisors may be perceived as retaliatory by individual employees who have raised concerns.

#### Maine State Employees Association

Representatives of the MSEA who work with DHHS employees on complaints and grievances noted some of the same issues and changes in the work environment mentioned by DHHS and BHR. They reported long-standing issues around employee morale, communication and poor work environment at DHHS. MSEA representatives also noted DHHS management's increased expectations around employee accountability as described by BHR. From MSEA's perspective, the changing expectations in this arena, including new goals, processes and use of discipline, have been contributing to higher job stress for MSEA employees at DHHS.

<sup>&</sup>lt;sup>4</sup> Human resources personnel for the Executive Branch, including those stationed within departments such as DHHS, are employees of DAFS BHR. These BHR employees are responsible for managing personnel processes and providing support to managers and supervisors in dealing with employee concerns, including disciplinary matters.

<sup>&</sup>lt;sup>5</sup> Employees contact their MSEA representatives with concerns that may become grievances. Employees may approach human resources first and, if dissatisfied, then ask the union for help. Union representatives provide employees with information about the union contract, what types of concerns can be grieved and, if they choose to file a grievance, support them through the grievance process.

MSEA representatives also described a top-down culture having been in place at DHHS. They sense that employees continue to not feel heard, valued or trusted by DHHS management, and that inappropriate behavior and bullying by managers toward employees has gotten worse in recent years. They pointed to insufficient training of supervisors as a potential contributing factor to some of these issues in the work environment.

#### **OPEGA's Approach to Data Analysis**

OPEGA analyzed data from three sources to assess the extent to which the data indicate systemic problems with the culture and work environment at DHHS and support the concerns raised by the individual complainants. We focused primarily on data from the employee climate surveys DHHS administered to its employees in 2013 and 2014, which provide a ground-level view of employee engagement and the work environment. We reviewed the reports of survey results published by DHHS, for the Department as a whole and for individual offices. We independently analyzed the raw survey data from both years and compared our results to those published in reports on organizational culture in the public sector.

We also performed high-level analyses of trends in statewide employee termination rates and MSEA grievance rates at the department level, comparing DHHS with other Executive Branch departments, for the period 2008 - 2014. For these analyses, we used BHR personnel data on terminations and MSEA data on grievances filed by MSEA-covered employees. Termination and grievance data was available for most, but not all, of 2014. We projected those figures out to a full year to facilitate a year-by-year analysis. OPEGA did not assess the reliability of the termination and grievance data sets, but considered them sufficient for the high-level analyses we sought to perform.

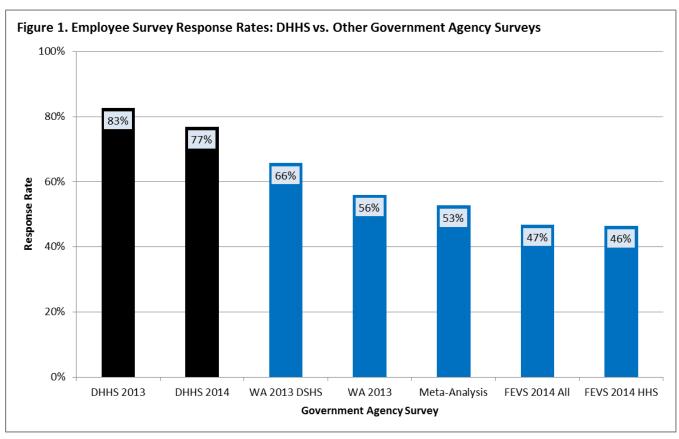
#### **DHHS Employee Climate Survey: Analysis Results**

Prior to analyzing the survey data, OPEGA determined its reliability and relevance by assessing the survey instruments and how the survey was administered along several dimensions (see Attachment A for copies of the survey instruments), noting the following:

- *Relevance*. The surveys included questions relevant to organizational climate in general and to the specific concerns and issues raised by complainants.
- **Question wording.** The survey incorporated questions similar, or identical, to those we found recommended in the research literature on measuring organizational climate and employee engagement.
- **Respondent anonymity.** The survey was administered by the Department's Office of Continuous Quality Improvement (OCQI) through a web-based application (Survey Monkey) and collected no personally-identifying information on employees; responses were anonymous.
- *Representativeness of data.* The survey achieved a high response rate, ensuring the representativeness of the data.

The response rate, which measures the proportion of surveyed individuals who respond to the survey, is an important consideration because a high response rate indicates that the survey data is representative of the survey population. As shown in Figure 1, the DHHS Climate Survey achieved an overall high response rate in both years, both in absolute terms and in comparison to response rates achieved or cited in organizational research we reviewed. This indicates that the survey data available for our analysis is representative of the DHHS workforce as a whole.

<sup>&</sup>lt;sup>6</sup> DHHS employees include union and non-union members; MSEA represents the largest group of union members in the Department.



Legend	
DHHS 2013	DHHS 2013 Employee Climate Survey
DHHS 2014	DHHS 2014 Employee Climate Survey
WA 2013 DSHS	2013 WA State Employee Survey, Department of Social and Health Services <sup>7</sup>
WA 2013	2013 WA State Employee Survey <sup>8</sup>
Meta-Analysis	Baruch (2008) Survey Response Rate Levels and Trends in Organizational Research9
FEVS 2014 AII	2014 Federal Employee Viewpoint Survey 10
FEVS 2014 HHS	2014 Federal Employee Viewpoint Survey, U.S. HHS <sup>11</sup>

Based on these observations, OPEGA determined the survey data obtained from DHHS was sufficiently reliable and relevant for our analysis.

We selected a subset of 11 measures from the DHHS climate survey for our analysis. In selecting these measures, OPEGA considered the following factors: relevance to issues raised in the complaints; alignment with questions recommended in the research literature and available for comparison to other studies; and availability in both survey years. The selected questions, listed in Table 1, focus on several aspects of the organizational climate and work environment including: communication, management behavior, atmosphere, expectations, workload and resources. We analyzed responses to these questions for DHHS overall and by individual offices. A response of "agree" or "strongly agree" to the positively-worded statements indicated employee satisfaction.

<sup>&</sup>lt;sup>7</sup> Office of Financial Management, State Human Resources Division, State of Washington. (2014). 2013 Washington State Employee Survey.

<sup>8</sup> Ibid.

<sup>&</sup>lt;sup>9</sup> Baruch, Yehuda, & Holtom, Brooks, C. (2008). Survey Response Rate Levels and Trends in Organizational Research. *Journal of Human Relations*.

<sup>&</sup>lt;sup>10</sup> U.S. Office of Personnel Management. (2014). Federal Employee Viewpoint Survey 2014.

<sup>&</sup>lt;sup>11</sup> Ibid.

#### **Overall Department Results**

As shown in Table 1, survey results from 2013 and 2014 indicate that DHHS employees<sup>12</sup> are satisfied with the climate and work environment overall, and do not suggest significant organizational issues and concerns Department-wide.

Table 1. Satisfaction Rates for Selected DHHS Survey Measures					
		Agree or e (%)			
Survey Measure	2013	2014			
I know what is expected of me at work.	93%	93%			
I have material, information and equipment I need to do my work.	83%	82%			
At work, my opinion seems to count.	68%	73%			
I am Satisfied with: Communication from the DHHS as a whole.	59%	56%			
I am Satisfied with: Communication from my Office/Division.	65%	62%			
I am Satisfied with: Approachability of management in my Office/Division.	76%	74%			
I am Satisfied with: Trustworthiness of management in my Office/Division.	70%	70%			
I am Satisfied with: Dignity and respect with which I am treated by management in my Office/Division.	77%	75%			
I am Satisfied with: Dignity and respect with which I am treated by the people with whom I work.	88%	88%			
I am Satisfied with: The amount of work required of me.	68%	67%			
I am Satisfied with: The atmosphere that is fostered by management in my Office/Division.	62%	64%			
Number of respondents	2562	2442			

For six of the 11 questions, satisfaction levels were 70% or higher in both survey years. The highest satisfaction reported was in knowing what is expected at work, which was 93% in each year. Employees were also particularly satisfied in terms of being treated with dignity and respect by coworkers and management, and having what they need to do their work. Employees were least satisfied with communication from DHHS as a whole, which rated below 60% in both years. Employees also had lower ratings for communication from, and atmosphere fostered by, management at the office/division level.

To get a sense of how the reported satisfaction levels at DHHS compare to other organizations in the public sector, we benchmarked the DHHS data against surveys of other government agencies. Table 2 shows that DHHS compared favorably with these other agencies, including federal agencies defined by U.S. Merit Systems Protection Board (MSPB) as "highly engaged".<sup>13</sup>

Table 2. Satisfaction Rates on Common Survey Measures: DHHS vs. Other Government Agencies (see Legend Fig. 1)								
Dimension measured by survey	DHHS 2013	DHHS 2014	FEVS 2014 (All)	FEVS 2014 (HHS)	MSPB 2009 Highly Engaged	WA 2013 (All)	WA 2013 (DSHS)	
Know work expectations	93%	93%	79%	79%		88%	87%	
Information to do the job well	83%	82%	69%	72%	64%	72%	68%	
Opinion counts/listened to	68%	73%	75%	76%				
Trust and confidence in manager/supervisor	70%	70%	65%	66%	69%			
Treated with respect by manager/supervisor	77%	75%	80%	80%		85%	83%	
Workload is reasonable	68%	67%	57%	59%	69%			

<sup>12</sup> In discussing the survey results, we use the term "employees" to refer to employees who responded to the survey.

<sup>&</sup>lt;sup>13</sup> U.S. Merit Systems Protection Board. (2009). *Managing for Engagement - Communication, Connection, and Courage.* 

#### **DHHS Office Results**

OPEGA further analyzed the survey data by office, or work unit, within the Department to assess the extent to which the concerns of the complainants are reflected in the data at the office level, and to identify any other offices, which present concerns. Of the three offices that were the focus of complaints, MCDC and RPC survey results presented potential concerns, but DLRS did not.

- MCDC compared favorably to overall DHHS results (higher percent of positive responses) for all 11 measures in 2013, but by 2014 satisfaction was below the Department average for seven of the 11 measures.
- RPC reported lower satisfaction (lower percent of positive responses) than the Department as a whole for
  most measures in 2013 and satisfaction declined further by 2014. In 2014, RPC results were more than 10
  percentage points *below* the Department-wide average for seven of the questions analyzed.
- DLRS, in contrast to other complainant offices, compared favorably to overall DHHS results for ten of 11 questions in both 2013 and 2014. The one measure for which the DLRS result was lower than the Department-wide average was "I know what is expected of me at work", and even for that question, the DLRS result was still relatively high at 86% in 2013 and 89% in 2014.

Two other offices stood out in the data.

- Disability Determination Services (DDS) within Office of Family Independence (OFI) reported the lowest satisfaction ratings in both years. This office also had a low survey response rate survey (45%), but is one of the smallest organizational units separately identified in the survey data (28 respondents out of 53 employees in 2014). As noted in the literature, "a low [response] rate could suggest a lack of interest that, by itself, can indicate a problem and also mean that the results are not truly representative"<sup>14</sup>.
- The Office of Financial Management also had low satisfaction levels relative to DHHS as a whole.

Table 3 shows results for DHHS as a whole, and separately for the five offices discussed above, for eight of the 11 survey questions we identified as particularly relevant to communication and behaviors in the work environment.

Table 3. Satisfaction Rates on Selected Surv	ey Meas	sures fo	r DHHS	and Se	lected C	ffices						
				Pe	ercentag	ge Stron	gly Agre	e or Ag	ree			
	Ave	HS rage ffices)	Regu Serv	sing & latory ices RS)	Cont Preve	Center sease rol & ntion DC)		rview iatric (RPC)	Fina Manag (OF	ement	Determ Serv	bility ination (ices DS)
Survey Measure	2013	2014	2013	2014	2013	2014	2013	2014	2013*	2014	2013	2014
At work, my opinion seems to count.	68%	73%	70%	80%	78%	74%	62%	58%	59%	66%	33%	36%
I am Satisfied with: Communication from the DHHS as a whole.	59%	56%	76%	71%	59%	51%	54%	51%	63%	55%	48%	45%
I am Satisfied with: Communication from my Office/Division.	65%	62%	70%	71%	68%	55%	61%	49%	56%	51%	48%	36%
I am Satisfied with: Approachability of management in my Office/Division.	76%	74%	79%	80%	77%	65%	75%	58%	72%	61%	44%	36%
I am Satisfied with: Trustworthiness of management in my Office/Division.	70%	70%	75%	79%	75%	58%	59%	49%	65%	56%	26%	36%
I am Satisfied with: Dignity and respect with which I am treated by management in my Office/Division.	77%	75%	82%	81%	82%	72%	75%	59%	68%	58%	52%	45%
I am Satisfied with: Dignity and respect with which I am treated by the people with whom I work.	88%	88%	94%	91%	90%	92%	79%	79%	88%	85%	85%	86%
I am Satisfied with: The atmosphere that is fostered by management in my Office/Division.	62%	64%	75%	74%	62%	52%	55%	43%	59%	49%	30%	41%
Number of respondents	2562	2442	92	91	286	275	184	136	90	80	29	28
*2013 OFM value includes: Auditing, District Operations	s-Account	ing, and F	inancial	Managem	ent and F	ate Settir	ng; these	were grou	iped unde	r OFM in	2014 sur	vey.

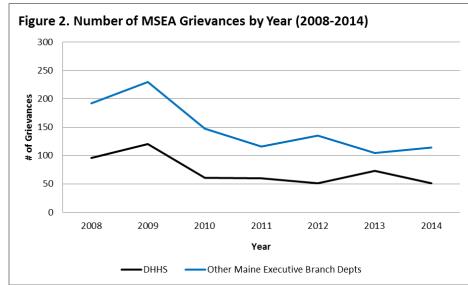
<sup>&</sup>lt;sup>14</sup> Lavigna, p. 142.

#### **Terminations and Grievances: Analysis Results**

To supplement the analysis of employee survey data, OPEGA examined whether and to what extent termination and grievance activity suggests systemic problems in the work environment at DHHS. We trended employee termination and grievance rates for 2008 – 2014 at the department level and compared DHHS to the other Executive Branch departments.

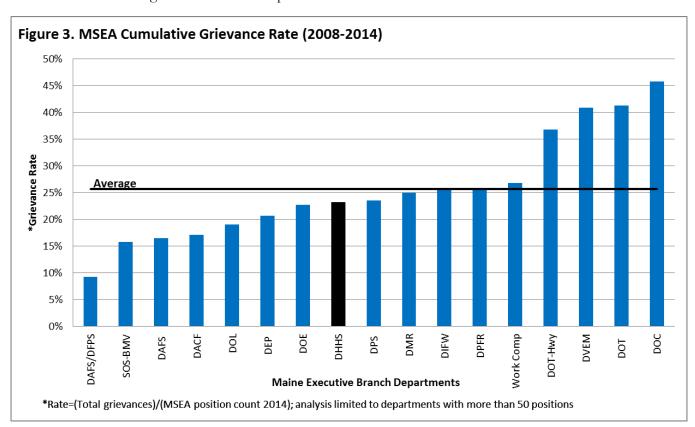
#### Grievances

Grievances are a potential indicator of an adverse work environment from the perspective that such a work environment would increase the likelihood of grievable conditions being present. As shown in Figure 2, overall grievance activity at DHHS followed a similar pattern as other Executive Branch departments taken as a group over the period 2008 – 2011. Between 2012 and 2014 DHHS grievances did not mirror other Executive Branch agencies; both saw slight

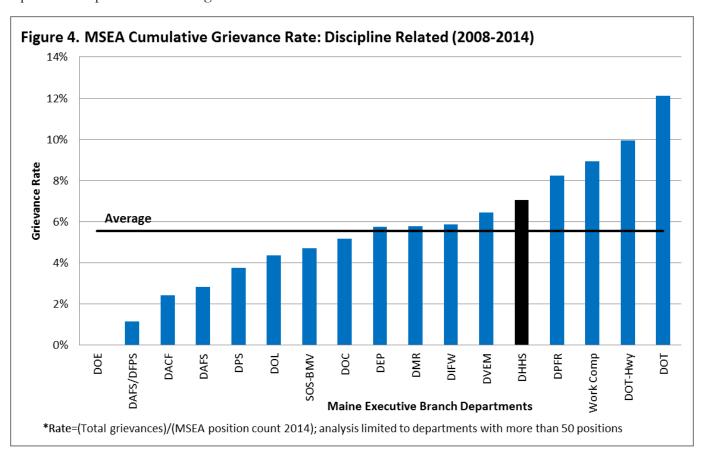


variations in both directions, with an apparent decrease at DHHS in 2014.

OPEGA also analyzed the cumulative grievance rate calculated as the number of grievances over a period of time per 100 MSEA employees. As shown in Figure 3, DHHS' cumulative grievance rate for the seven year period is 23% and is *below* the average of 26% for all Departments.



One of the themes expressed by complainants was being disciplined as retaliation for raising concerns. To gain insight on this potential issue, OPEGA analyzed grievance rates for the subset of MSEA grievances coded as discipline-related. As shown in Figure 4, we observed that the cumulative discipline-rated grievance rate at DHHS at 7% is *above* the average for Executive Branch departments over the seven-year period (5.6%). However, there is a group of four departments with higher rates than DHHS.



#### **Terminations**

Terminations, whether voluntary or involuntary, are a potential indicator of an adverse work environment from the perspective that such an environment would increase the likelihood that employees leave or are dismissed. OPEGA analyzed termination rates for Executive Branch departments, calculated as terminations per 100 employees.

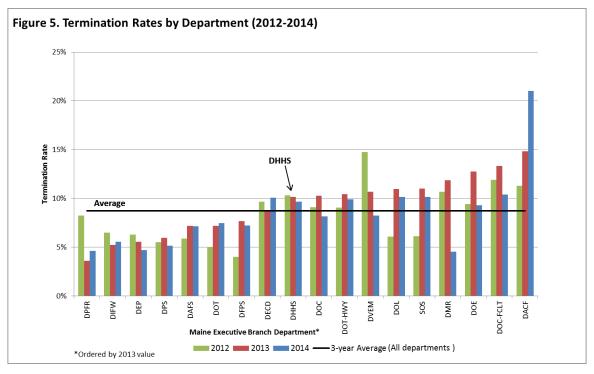
We found the overall rate of employee terminations at DHHS to be similar to that for other Executive Branch departments as a group over the seven-year period. As Table 4 illustrates, the termination rate at DHHS and other State departments was highest in 2011, the year in which the State offered early retirement incentives. For the period following 2011, DHHS' termination rate was slightly higher (10%) than the other departments' (9%).

Table 4. Termination Rate by Year for Maine Departments vs. Other Government Workers									
2008 2009 2010 2011 2012 2013 2014 Averag								Average	
DHHS	8%	10%	8%	14%	10%	10%	10%	10%	
Other State of Maine Departments	8%	8%	8%	11%	8%	10%	9%	9%	
Government workers (nationally)*	15%	15%	18%	16%	16%	16%	16%	16%	

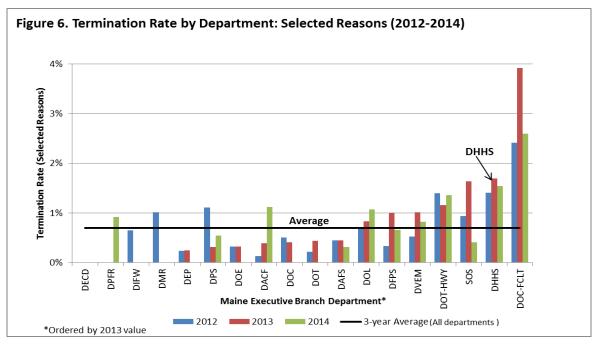
<sup>\*</sup>U.S. Department of Labor, Bureau of Labor Statistics, Job Openings and Labor Turnover Survey

<sup>&</sup>lt;sup>15</sup> Specifically, OPEGA defined discipline-related grievances as those with "discipline" or "reprimand" listed in the "violation" field in the MSEA data.

Figure 5 provides additional detail comparing DHHS termination rates with other Executive Branch departments for the years 2012 - 2014. To understand these data in a broader context, OPEGA looked to national data from the U.S. Department of Labor on termination, or separation, rates by employment sector (Table 4). Termination rates for DHHS, and other State departments as a group, were consistently lower than the national averages for workers in the government sector for the period 2008 - 2014.



One of the themes in the complaints we reviewed was employees being fearful of being dismissed or "pushed out" of their job for voicing concerns. To gain further insight on this issue, OPEGA analyzed rates of a subset of terminations coded as *dismissal* or *leaving without notice*. As shown in Figure 6, termination rates for this subset of reasons were very low, with a three-year average for all State departments of less than 1%. DHHS' average rate of 1.5%, while higher than the State average, was also very low.



#### **DHHS Efforts to Assess and Improve Organizational Culture**

Senior management at DHHS reported that the Department has implemented a number of efforts, in addition to the climate survey, to address organizational culture and employee engagement. Examples reported include:

- One-on-one visits the Commissioner conducted with employees at all DHHS district offices over the last several years;
- Virtual office hours the Commissioner held with employees through "Connecting with the Commissioner" events; and
- Town hall forums established by several of the offices to engage their employees.

OPEGA asked the Department to describe and provide documentation of actions taken following the dissemination of employee climate survey results. In the documentation, we observed that some offices have been particularly active in responding to survey results and addressing work environment issues, such as employee retention. However, the level of effort and activity in this regard has been inconsistent across offices, ranging from high to minimal. It appears that using the survey results to identify issues and make improvements has been encouraged, but not required, across the Department.

Our research into organizational culture and employee engagement in the public sector suggests a number of actions an organization can take to positively affect its culture and improve the level of employee engagement in key areas. We compared actions taken by the Department to recommended practices identified in the literature. We noted that DHHS actions to date are consistent with those recommended practices. Selected examples from documentation provided by DHHS are highlighted below.

- ▶ Recommended practice Employee Input: Implement regular employee surveys (every two or three years) to gather data on the work environment; collect and analyze survey data and other employee input. Use information from surveys and other employee input to create and implement action plans; follow-up with employees regarding whether and how feedback was used. <sup>16</sup>
  - DHHS conducted an employee climate survey in 2013 and 2014. According to OCQI, the office responsible for the survey, DHHS plans to conduct another survey in 2016 and continue on a two-year cycle thereafter.
  - OCQI presented the survey results in Senior Management meetings with the Commissioner, provided each
    office/division with its specific survey results and discussed them with management of the office/division.
    Some offices took follow-up actions to share survey results with employees. For example, management at
    Dorothea Dix Psychiatric Center (DDPC) and DLRS disseminated survey results to staff, highlighted areas
    for attention, and described actions they planned to take as a result.
  - Recently added Recruitment and Retention Specialists in the Office of Child and Family Services (OCFS)
    and the Office of Family Independence (OFI), the Department's two largest offices, have created officespecific employee exit surveys to gather employee input on reasons for leaving employment, as well as
    various aspects of job satisfaction, supervision, and the work environment.
- ▶ <u>Recommended Practice Communication:</u> Implement communication and collaboration best practices, provide incentives to reward communication, and evaluate and improve communication methods.
  - The DHHS Employee Climate Survey includes questions to evaluate communication.
  - Some office directors have instituted regular communications via email and/or newsletters to exchange information with employees. These include DDPC, DLRS, OFI, the Division of Support Enforcement and Recovery (DSER), Office of MaineCare Services (OMS), and Division of Audit.

<sup>&</sup>lt;sup>16</sup> U.S. Merit Systems Protection Board. (2009). *Managing for Engagement*, p.71, 75-76.

- Samples of these regular communications provided by DHHS illustrate a wide range of topics addressed
  including: ongoing improvement efforts, specific efforts to address survey results, recognition of office
  and/or individual employee accomplishments, office policies, staff profiles, and support available to
  employees.
- ▶ <u>Recommended Practice Training:</u> Evaluate training needs and develop training plans for staff, ensure management team receives supervisory training, and provide additional leadership training for program managers and division directors.
  - DDPC surveyed its staff regarding requests for education topics and then provided resources and training based on the top topics requested.
  - DLRS, in its strategic plan, established an initiative on workforce development which includes monitoring and addressing staff training needs.
  - In response to employee concerns about training resources, DSER revised its employee training and added Training Specialist positions to prepare and deliver training to employees.
- ▶ Recommended Practice Personnel Policies and Guidelines: Establish and implement clear policies and guidelines around workplace behavior, communications, training requirements, personnel actions, and whistleblower protection, and regularly inform employees of current/updated policies.
  - The DLRS Director's regular all-staff emails address the implementation and communication of policies relating to the work environment, including conflicts of interest, civil behavior in the workplace, respect and dignity, and telecommuting.
  - In Weekly Message emails and monthly MaineCare News, the Director of OMS includes information
    regarding personnel policies and resources, building safety and emergency protocols, and protecting
    confidential information.
- ▶ <u>Recommended Practice Oversight of Management:</u> Conduct regular reviews and evaluation of management's leadership and handling of personnel matters; identify and implement actions to correct poor management practices.
  - While not specifically noted in the information provided by the Department, OPEGA observed that there have been several fairly recent management and organizational changes made at DHHS.
    - O DLRS management changed in 2012 and the new Director established and began implementing a well-defined strategic plan for improvement in a number of areas. DLRS Child Care Licensing added new staff and reorganized as a result of this plan.
    - o RPC, MCDC, and the Office of Financial Management (OFM) also now have new leadership.
  - DSER reports instituting a Supervisory Practice Review project.
  - The Deputy Commissioner of Finance reports meeting individually with OFM contract management staff and reorganizing the contract management office as part of the Department's contracting process reform initiative.

#### Conclusion and Opportunities for Improvement

This review focused on assessing the extent to which the unsolicited complaints received represented systemic issues within DHHS and/or warranted detailed root cause analysis. We analyzed DHHS 2013 and 2014 employee survey data, MSEA grievance data and BHR termination data to perform this assessment. Our research and analyses suggest the more serious concerns expressed in the individual complaints are not systemic throughout DHHS, but may be present in several offices within the Department, including two of those associated with the complaints.

Research indicates a close relationship between a healthy organizational culture and high levels of employee engagement. Effective performance management practices have been found to increase employee engagement. As described by one study, communication, connection and courage are the foundation of effective performance management, specifically: "communicating openly and honestly with employees, connecting with them as people to build strong working relationships, and demonstrating the courage to address and resolve problems".<sup>17</sup>

The Department has expressed a commitment to continuing and building upon recent efforts to improve employee engagement and the overall climate. OPEGA has identified the following opportunities for DHHS consideration as it proceeds with those efforts:

- Continue administering an employee climate survey on a regular basis as planned; biennial surveys will allow
  the Department to implement changes that address issues identified by employees and assess their
  effectiveness over time.
- Include a core set of survey questions that are consistent over time to enable trend analyses for the Department and individual offices; consider incorporating questions from published research on measuring employee engagement.
- Analyze survey data separately for sub-units of the larger offices/divisions to identify pockets of concern and efficiently target follow-up efforts.
- Establish specific expectations at the office/division level for reviewing and using the survey results and hold management accountable for meeting expectations.
- Capitalize on the success and underlying efforts taken in certain offices to address organizational issues and increase employee engagement; identify and share best practices across offices.
- Continue and expand efforts to build employee trust, recognize and reward accomplishments and increase transparency through frequent and open communication.
- Encourage offices/divisions to develop and implement strategic action plans that include steps to increase employee engagement; incorporate strategic plan implementation in performance evaluation of managers.

#### **Acknowledgments**

OPEGA thanks the management and staff at the Department of Health and Human Services, in particular the Office of Continuous Quality Improvement, and the Department of Administration and Financial Services' Bureau of Human Resources for their cooperation during this review.

<sup>&</sup>lt;sup>17</sup> *Ibid.* p.ii.

#### Acronyms Used in This Information Brief

BHR Bureau of Human Resources (DAFS)

DACF Department of Agriculture, Conservation and Forestry
DAFS Department of Administrative and Financial Services

DDPC Dorothea Dix Psychiatric Center (DHHS)
DDS Disability Determination Services (DHHS)

DECD Department of Economic and Community Development

DEP Department of Environmental Protection

DFPS Division of Financial and Personnel Services (DAFS)

DHHS Department of Health and Human Services
DIFW Department of Inland Fisheries and Wildlife

DLRS Division of Licensing and Regulatory Services (DHHS)

DMR Department of Marine Resources

DOC Department of Corrections

DOC-FCLT Department of Corrections - Correctional Facilities

DOE Department of Education
DOL Department of Labor

DOT Department of Transportation

DOT-Hwy Department of Transportation - Highway Crew

DPFR Department of Professional and Financial Regulation

DPS Department of Public Safety

DSER Division of Support Enforcement and Recovery (DHHS)

DSHS WA Department of Social and Health Services

DVEM Department of Defense, Veterans and Emergency Management

FEVS Federal Employee Viewpoint Survey GOC Government Oversight Committee

MCDC Maine Center for Disease Control and Prevention (DHHS)

MSEA Maine State Employees Association MSPB U.S. Merit Systems Protection Board

OCFS Office of Child and Family Services (DHHS)

OCQI Office of Continuous Quality Improvement (DHHS)

OFI Office of Family Independence (DHHS)
OFM Office of Financial Management (DHHS)
OMS Office of MaineCare Services (DHHS)

OPEGA Office of Program Evaluation and Government Accountability

RPC Riverview Psychiatric Center (DHHS)

SOS Secretary of State

SOS-BMV Secretary of State - Bureau of Motor Vehicles

WA Washington State Employee Survey Work Comp Workers' Compensation Commission

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Attachment A: 2013 and 2014 Employee Climate Surveys Department of Health and Human Services

#### **INTRODUCTION**

Please note your responses to this survey are strictly anonymous and no personal identifying information, such as your e-mail address, name, birth date or other potentially identifying information will be collected. In addition, the information that you provide will be grouped with other responses and included into an overall report of the findings. The survey is voluntary and takes between 5 to 10 minutes to complete.

We hope that you will choose to participate. The information obtained from this survey will be used to identify common concerns across DHHS and to guide and inform further development of the DHHS workforce.

Thank you very much for your time and consideration.

#### **DEMOGRAPHICS**

In order to keep potentially identifying information from being collected, respondents from Administrative Hearings, Office of Continuous Quality Improvement Services, and Office of Multicultural Affairs should use the Commissioner's Office (Question 5) for the purposes of this survey.

#### Q1. Gender

- 1. Male
- 2. Female

#### Q2. Age

- 1. 24 and Under
- 2. 25-34
- 3. 35-54
- 4. 55-64
- 5. 65 and Over

#### Q3. Length of Service

- 1. 0-5 Years
- 2. 6-10 Years
- 3. 11-15 Years
- 4. 16-20 Years
- 5. 21+ Years

#### Q4. Salary Grade

- 1. Grade 17 or Below
- 2. Grade 18-23
- 3. Grade 24 or Above
- 4. Contractor

#### Q5. Office (if you cannot find your office, please see note in DEMOGRAPHICS section)

- 1. ADS Aging & Disability Services
- 2. AUD Auditing
- 3. CDC Maine Center for Disease Control & Prevention
- 4. CFS Child & Family Services
- 5. COM Commissioner's Office
- 6. DDS Disability Determination
- 7. DOA District Operations Accounting
- 8. DOF District Operations Facilities Management
- 9. DPC Dorothea Dix Psychiatric Center
- 10. DPS Purchased Services
- 11. DSE Support Enforcement & Recovery Services
- 12. LRS Licensing & Regulatory Services
- 13. OFI Office for Family Independence
- 14. OFM Financial Management & Rate Setting
- 15. OMS MaineCare Services
- 16. RPC Riverview Psychiatric Center
- 17. SMH Substance Abuse & Mental Health Services

#### **SURVEY**

Please assign a rating on a scale of 1 to 4 where 1 represents "Strongly Agree" and 4 represents "Strongly Disagree" (1 = Strongly Agree; 2 = Agree; 3 = Disagree; 4 = Strongly Disagree) to the following statements.

Please assign an importance rating of high, medium, or low to indicate how important each statement is to your overall job satisfaction.

#### Q6. Rate your job satisfaction and level of importance for each statement

Rating Scale			Impo	ortance Ra	ting	
1	2	3	4	High	Medium	Low
0	0	0	0	0	0	0

I know what is expected of me at work.

I have material, information and equipment I need to do my work.

At work, I have the opportunity to do what I do best every day.

In the last 14 days, I or my team have received recognition or praise for doing good work.

My immediate supervisor(s) seems to care about me as a person.

There is someone who encourages my development.

In the last six months, someone at work has talked to me about my progress.

At work, my opinion seems to count.

The mission/purpose of the DHHS makes me feel my job is important.

My fellow employees are committed to doing quality work.

The Executive Leadership at the DHHS understands and values the contributions my Office/Division makes to the Department's mission.

In general, I like and look forward to change.

This last year, I have had opportunities to learn and grow.

I participate in the decision making process by offering my opinion, comments, and solutions.

#### Q7. Overall, I am satisfied with:

**Rating Scale** 

ng Scale Im

Importance Rating High Medium Low













My current Office/Division as a place to work.

Efficiency in my current Office/Division.

My compensation.

Communication from the DHHS as a whole.

Communication from my Office/Division.

Accountability of the people with whom I work for their actions.

Approachability of management in my Office/Division.

Trustworthiness of management in my Office/Division.

Dignity and respect with which I am treated by management in my Office/Division.

Dignity and respect with which I am treated by the people with whom I work.

The amount of work required of me.

The nature of the work required of me.

The amount of learning I do in my work.

The atmosphere that is fostered by management in my Office/Division.

My overall job.

- Q8. If you had an opportunity to change one thing at work, what would it be?
- Q9. If you have additional comments you would like to share, please use the space provided to elaborate.

INTRODUCTION
Please note your responses to this survey are strictly anonymous and no personal identifying information, such as your e-mail address, name, birth date or other potentially identifying information will be collected. In addition, the information that you provide will be grouped with other responses and included into an overall report of the findings. The survey is voluntary and takes between 5 to 10 minutes to complete.
We hope that you will choose to participate. The information obtained from this survey will be used to identify common concerns across DHHS and to guide and inform further development of the DHHS workforce.
Thank you very much for your time and consideration.

### **DEMOGRAPHICS**

of Continuous Quality Improvement, and Office of Multicultural Affairs should use the Commissioner's Office (COM). Respondents from Auditing, District Operations Accounting, Division of Purchased Services, Contract Management, Financial Management, and Rate Setting should use the Office of Financial Management (OFM).
1. Length of Service
O 0-5 Years
C 6-10 Years
C 11-15 Years
C 16-20 Years
C 21+ Years
2. Office (if you cannot find your office, please see note in DEMOGRAPHICS section)
3. Office Location (optional)
C Region 1: District 1 York (York County) & District 2 Cumberland (Cumberland County)
C Region II: District 3 Western Maine (Androscoggin, Oxford and Franklin Counties) & District 4 Mid Coast (Lincoln, Knox, Waldo and Sagadahoc Counties) & District 5 Central Maine (Somerset and Kennebec Counties)
C Region III: District 6 Penquis (Piscataquis and Penobscot Counties) & District 7 Downeast (Washington and Hancock Counties) & District 8 Aroostook (Aroostook County)

### **SURVEY**

Please assign a rating on a scale of 1 to 4 where 1 represents "Strongly Agree" and 4 represents "Strongly Disagree" to the following statements.

### 4. Rate your job satisfaction for each statement.

in that your job outlier and it out out out out				
	1 = Strongly Agree	2 = Agree	3 = Disagree	4 = Strongly Disagree
I know what is expected of me at work.	0	0	0	0
I have the materials, information and equipment I need to do my work.	0	0	0	0
At work, I have the opportunity to do what I do best every day.	0	O	0	0
In the last 14 days, I or my team have received recognition or praise for doing good work.	0	0	0	0
My immediate supervisor(s) seems to care about me as a person.	0	0	0	0
There is someone who encourages my development.	0	0	0	0
In the last six months, someone at work has talked to me about my progress.	0	0	0	0
At work, my opinion seems to count.	$\circ$	$\circ$	0	$\odot$
My fellow employees are committed to doing quality work.	0	0	0	0
The Executive Leadership at the DHHS understands and values the contribution my Office/Division makes to the Department's mission.	0	0	0	0
This last year, I have had opportunities to learn and grow.	0	0	0	0
I am satisfied with my compensation.	$\circ$	$\circ$	0	0
I am satisfied with communication from the DHHS as a whole.	0	0	0	0
I am satisfied with communication from my Office/Division.	$\circ$	0	$\circ$	$\circ$
I am satisfied with accountability of the people with whom I work for their actions.	0	0	0	0
I am satisfied with approachability of management in my Office/Division.	$\circ$	$\circ$	0	$\odot$
I am satisfied with trustworthiness of management in my Office/Division.	0	0	0	0
I am satisfied with dignity and respect with which I am treated by management in my Office/Division.	0	0	O	O
I am satisfied with dignity and respect with which I am treated by the people with whom I work.	0	0	0	0
I am satisfied with the amount of work required of me.	0	0	0	0
I am satisfied with the nature of the work required of me.	0	0	0	0
I am satisfied with the atmosphere that is fostered by management in my Office/Division.	0	0	0	0
I am satisfied with my overall job.	0	0	0	0

Work Load (increased volume of work)	$\hfill \square$ Integrity (maintain confidentiality, consistency and accuracy					
Staff Retention (loss of experienced staff)	work, follow rules/procedures)					
Job Expectations/Specifications (lack of job clarity, unclear work spectations, undefined job specifications)	☐ Improve Office Environment (boundary issues, favoritism, inappropriate behaviors, more teamwork)					
Location (satellite offices, office region, site)	$\hfill \Box$ Flexibility (arranging or accommodating one's needs and functions to do the job)					
Safety (being in harm's way, more security, concerns for safety in eld or office)	☐ Trust (improve positive relations between colleagues, managers/supervisors and front line workers, instill collaborative					
More Staff (reduced workload burden, inadequate staffing)	approach)					
Caseload Size (unrealistic amounts of cases per worker, realistic melines/deadlines)	Low Morale (reengage staff, encourage working together, instill positive work environment, increase productivity and accountability)					
More Direct Support/Resources to Clients (provide more services and referrals to clients)	$\hfill \Box$ Accountability (taking responsibility for own actions/behavior that affects the office)					
Office Accommodations (better equipment, ergonomics, cubicle pace requirements)	☐ Management Style (inconsistent management approaches and decision making/supervisory skills, lack of direction, delegation of projects)					
System Improvement (faster computers, improve EIS nctionality, system efficiency)	Executive Management (refers to high-level administrators, including the Governor, DHHS Executive Leadership Team, and					
Improve Approval Process (contract management, grant pre-	Senior Management/Division Directors)					
pproval processes)	Decision Making (more employee input in decisions being ma					
Office Setting (too crowded, lack of privacy, heating/lighting sues)	on office policies, rules, and job specifications)					
_	Communication (increased transparency, sharing information, listening both ways, being heard, participating in discussions)					
☐ Training (management training, supervision training, b/technology training)						
Professional Development (more educational opportunities, ition reimbursement)	<ul><li>☐ Fairness (equal treatment of all regardless of position)</li><li>☐ Office Work Hours (not the same among staff)</li></ul>					
Promotional Opportunities (job advancement based on skills and	Remote Work (options to work from home)					
ualifications)  Job Satisfaction (satisfied with current job)	Recognition (meaningful acknowledgement of work, words of encouragement of good work)					
_	Compensation (COLA, merit increases, higher gas mileage pay					
Respect (teach others to respect one another with opinions, nowledge, skills and talents regardless of position)	☐ Health Insurance (Anthem preference, Aetna copay issues)					
Other: Please Specify (Note: Text limited to 75 words)						
	d like to share, please use the space provide					
elaborate. (Note: Text limited to 300 words)	<b>J•</b>					